

## Facts about

### Adolescents and HIV/AIDS

The number of acquired immunodeficiency syndrome (AIDS) cases reported each year among U.S. adolescents (13-19 years of age) has increased from 1 case in 1981 to 417 cases in 1994. Through June 1995, a total of 2,184 AIDS cases among adolescents has been reported. Human immunodeficiency virus (HIV)/AIDS is still the sixth leading cause of death among 15- to 24-year-olds in the United States.

Although the number of adolescents with AIDS is relatively small, we know many more young people are infected with HIV. Since 1 in 5 reported AIDS cases is diagnosed in the 20-29 year age group, and the incubation period between HIV infection and AIDS diagnosis is many years, it is clear that large numbers of people who were reported with AIDS in their 20s became infected with HIV as teenagers. (Through June 1995, almost 18,000 persons aged 20-24 and more than 69,000 persons aged 25-29 have been reported with AIDS to the Centers for Disease Control and Prevention [CDC].)

Among adolescents reported with AIDS, older teens, males, and racial and ethnic minorities are disproportionately affected. However, the proportion of females among U.S. adolescent AIDS cases has almost tripled—from 14 percent in 1987 to 43 percent of the reported cases in 1994.

Many American teenagers are engaging in behaviors that may put them at risk of acquiring HIV infection, other sexually transmitted infections, or infections associated with drug injection. CDC studies conducted every 2 years in high schools (grades 9-12) consistently indicate that by the twelfth grade, approximately three-fourths of high school students have had sexual intercourse; less than half report consistent use of latex condoms, and about one-fifth have had more than four lifetime sex partners. Many students report using alcohol or drugs when they have sex and, in the most recent survey, 1 in 62 high school students reported having injected an illegal drug.

Surveys conducted in 1992 (see chart below) show that reported condom use actually declines with age, often because other forms of contraception, such as birth control pills, are used more frequently in the older age groups, and/or many older youth are married or in long-term monogamous relationships.

To reach youth with HIV prevention messages and services, CDC provides numerous HIV prevention programs through three primary avenues:

- · School settings
- · Community-based, regional, and national organizations, including minority organizations
- · Programs for the general public

#### School-Based Programs

Ninety-one percent of all persons between the ages of 5 and 19 in the United States are enrolled in schools, providing an effective way to reach young people. School-based health education programs in the United States have had consistently positive effects in preventing students from engaging in health risk behaviors.

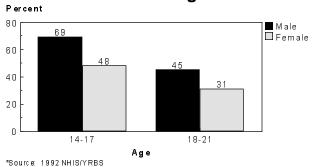
Since 1987, CDC has provided direct assistance to schools to develop, implement, and evaluate HIV/AIDS education programs. In 1988, only 17 states required such education. By 1992, the number of states requiring HIV education had increased to 34. CDC also helps train teachers, school administrators, and representatives from youth-serving community organizations from every state on the best ways to conduct HIV prevention education programs. CDC's Combined Health Information Database, which is accessible to any educator through the CDC National AIDS Clearinghouse, provides information on more than 1,000 curriculum guides,

audiovisuals, and other relevant information for use in teaching young people about HIV infection and AIDS.

## Community-Based, Regional, and National Prevention Programs

Not all youth can be reached through the schools. To reach teenagers and others not in school who may be at high risk for HIV infection, CDC funds (directly or through state and local health departments) HIV prevention activities by more than 500 communitybased organizations. These efforts include street outreach; clinic-based

# Percentage of Adolescents Who Used a Condom at Last Sexual Intercourse Among Those Who Had Sex in Past 3 Months, by Sex and Age\*



education; counseling, testing, and referral programs; and programs that address the specific needs of runaway, incarcerated, migrant, homeless, and other youth in high-risk situations. Recent data indicate that street outreach activities are useful in providing HIV prevention messages and interventions to populations at high risk of infection, including youth. CDC also provides financial and technical assistance to 21 national organizations for educational programs and materials directed to youth in high-risk situations, particularly inner-city and minority youth.

All CDC-funded state, local, and territorial health departments have instituted an HIV prevention community planning process. The community planning process aims to address unique community needs and at the same time to improve the cultural competence and scientific basis of HIV prevention programs. Together, representatives of affected populations, epidemiologists, behavioral scientists, HIV/AIDS prevention service providers, health department staff, and others analyze the course of the epidemic in their jurisdiction, determine their priority prevention needs, and identify HIV prevention interventions to meet those needs. The health department then incorporates these priority interventions into its prevention objectives for funding by CDC. In this manner, HIV prevention planning is shifted from a federally mandated to a locally directed program.

#### Public Information/Education Programs

CDC also targets prevention efforts for young people through its public information and education campaigns. These programs include a number of activities designed to educate all members of the public, including adolescents, about how HIV is transmitted, who is at risk of acquiring the infection,

and how the infection can be prevented. The programs include a national public information campaign, the CDC National AIDS Hotline, and the CDC National AIDS Clearinghouse.

Research has shown that most Americans, including teenagers, understand how HIV is transmitted and how they can avoid being infected. Therefore, confronting the belief that "it can't happen to me" was a primary goal of one series of CDC-sponsored public service announcements. Previous phases of the public information campaign have included many youth-oriented materials. In 1989, CDC launched a special education effort called "Parents and Youth" designed to help parents, teachers, and other concerned adults talk to children about HIV and AIDS. The educational materials from that campaign, including a brochure called "The AIDS Prevention Guide," are still available to anyone who requests them from the CDC National AIDS Hotline.

Another activity targeting youth is CDC's *Prevention Marketing Initiative (PMI)*, a large-scale social marketing program to influence behaviors that contribute to the sexual transmission of HIV and other diseases. It represents a shift from previous mass health communications programs, aimed at increasing general awareness of HIV/AIDS, to influence behavior changes among people at high risk for HIV infection or transmission. PMI is an application of marketing techniques and consumer-oriented communications technologies based on science and directed, in its first phase, to the prevention of sexual transmission of HIV and other diseases among young adults 18-25 years of age. The most visible PMI activity to date has been the national release of a series of public service announcements promoting abstinence as well as the correct and consistent use of latex condoms. To achieve the PMI behavioral objectives, CDC will work simultaneously at the national, state, and local levels through four components: (1) National Communications, (2) Prevention Collaborative Partners, (3) Local Demonstration Sites, and (4) Integration with *HIV Prevention Community Planning*.

For more information:

CDC National AIDS Hotline: 1-800-342-AIDS (2437)

Spanish: 1-800-344-SIDA (7432)

Deaf: 1-800-243-7889

CDC National AIDS Clearinghouse P.O. Box 6003 Rockville, MD 20849-6003